

# MIAMI BEACH

**Building Department**  
1700 Convention Center Drive, 2nd FL  
Miami Beach, Florida 33139  
305.673.7610 Fax: 305.673.7857

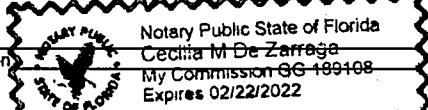
## Work Permit BC1705053 Building - Commercial

Status:	Issued	Date:	4/18/2018
Site Address:	5775 COLLINS AVE	Applied:	08/21/2017
Parcel #:	0232110070100	Issued:	04/18/2018
		Expiration Date:	10/15/2018
Total Job Value:	\$600,000.00	PIN:	41591
Contractor:	WINMAR CONSTRUCTION, INC CGC060294 5959 BLUE LAGOON DR SUITE# 100 MIAMI, FL	Owner:	MIAMI BEACH ASSOCIATES LLC 1450 BRICKELL AVE 1560 MIAMI , FL 33131
Description:	TOTAL DEMO OF MULTI FAMILY RESIDENTIAL STRUCTURE BY CONVENTIONAL METHODS. NO LONGER USING THE IMPLOSION METHOD		
Inspector Area:	Class Code: R2		

Statement of Work	Quantity	Total Fee
Training/Technology Fee - Building	12,000.00	\$720.00
Sanitation Surcharges	600,000.00	\$1,500.00
MDC Compliance Fee	600,000.00	\$360.00
Permit Fee - Building Department	9,600.00	\$9,600.00
Florida Building Code - DBPR Fee	120.00	\$120.00
Florida Building Code Admin and Inspector Fund	12,000.00	\$180.00
Permit 20% Initial Charge - Building	12,000.00	\$2,400.00
Construction Parking Management Plan (CPMP)	0.00	\$144.00
<b>Total of All Fees:</b>		<b>\$15,024.00</b>
<b>Total of All Payments:</b>		<b>\$15,024.00</b>
<b>Balance Due:</b>		<b>\$0.00</b>

MIAMI BEACH

## Permit Application

Applicant Information (Blue or Black Ink Only)			
Office Use Only		Parcel / Folio Number:	
Submittal Date: <u>1/17/2023</u>	Permit #: <u>RC1705053</u>	02-3211-007-0100	
Property Address: <u>5775 COLLINS AVE</u>		Unit #: <u></u>	Master Permit Number (If applicable): <u></u>
Permit Type (select one)		Permit Request (select all that apply)	
<input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Roofing <input type="checkbox"/> Phased Permit		<input checked="" type="checkbox"/> Demo year built <u>1969</u> <input type="checkbox"/> Generator <input type="checkbox"/> Special Event <input type="checkbox"/> Fire <input type="checkbox"/> New Permit <input type="checkbox"/> Change of Contractor <input type="checkbox"/> Change of Architect/Engineer <input type="checkbox"/> LEED <input type="checkbox"/> Permit Extension <input type="checkbox"/> Permit Renewal <input type="checkbox"/> Permit Revision <input type="checkbox"/> Change of Use <input type="checkbox"/> Private Provider <input type="checkbox"/> City Project	
		Property Information (select one)	
		<input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Multi-Family Residential <input type="checkbox"/> Residential: Single-Family Residential or Duplex	
		Occupancy Classification:	
		New Construction/Addition	
		Alteration/Reconfiguration of Space	
Total Value: <u>\$600,000</u>	Square Footage: <u></u>	\$ <u></u>	
Value of Work: <u>\$</u>			
Description of Work: <u>Total DEMOLITION</u> of multi family residential structure by conventional method. No longer using the implosion method.			
Property Owner		Contractor	
Name: <u>MIAMI BEACH ASSOCIATES</u> Address: <u>1450 BRICKELL AVE</u> Suite: <u>1560</u> City: <u>MIAMI</u> State: <u>FL</u> Zip Code: <u>33131</u>		Name: <u>WINMAR CONSTRUCTION</u> Address: <u>5959 BLUE LAGOON DR # 100</u> Suite: <u></u> City: <u>MIAMI</u> State: <u>FL</u> Zip Code: <u>33126</u>	
Driver's License/ State Identification Number:		State Identification Number/License: <u>CGC 060294</u>	
E-Mail Address:		Daytime phone:	
		<u>LEON@WINMARCOASTAL.COM</u>	
Architect		Structural Engineer	
Name: <u></u> License Number: <u></u> E-Mail Address: <u></u> Daytime phone: <u></u>		Name: <u></u> License Number: <u></u> E-Mail Address: <u></u> Daytime phone: <u></u>	
Notice & Certification			
<p>This application is hereby made to obtain a permit to do the work and installations as indicated. I certify that all work will be performed to meet the standards of all laws and construction regulations in this jurisdiction. I understand that a <b>separate permit</b> must be secured for Electrical, Elevator, Fire, Mechanical, Plumbing, Signs, Wells, Pools, Furnaces, Boilers, Heaters, Tanks, Air Conditioners, etc.</p> <p><b>Owner's Affidavit:</b> I certify that all the forgoing information is correct. Owner Certifies that the aforementioned Contractor has the authorization to perform the work as specified above.</p> <p><b>Lessee's Affidavit:</b> Lessee certifies that he has full consent and authorization from owner of subject property to perform the above mentioned work and to hire above captioned contractor.</p> <p>In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as: the Environmental Division of Miami-Dade County; Permitting, Environment and Regulatory Affairs, Water &amp; Sewer Department, Department of Environmental Protection, South Florida Water Management District, Miami-Dade County Impact Fee, water management districts, state agencies, and/or federal agencies.</p> <p>Under penalties of perjury, I declare that to the best of my knowledge, the facts stated in this document are true. Any information found to be false may cause the revocation and/or denial of the permit and/or Certificate of Occupancy.</p>			
OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this permit application is true and correct.			
<input type="checkbox"/> Owner/Lessee for new permits (Documentation establishing ownership may be requested) <input type="checkbox"/> Master Permit Contractor of Record (For sub-permit / change of contractor)			
<b>WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT IS REQUIRED FOR ANY WORK WITH COST EXCEEDING \$2,500.00.</b>			
Signature of Owner/Agent or GC (for Sub-permits): <u>Marcos Leon</u>		Signature of Qualifier: <u>Luis A. Leon</u>	
PRINT NAME: <u>Marcos Leon</u> STATE OF FLORIDA MIAMI-DADE COUNTY Sworn to and subscribed before me this <u>9th</u> day of <u>April</u> , <u>2018</u> by <u>Marcos Leon</u>		PRINT NAME: <u>Luis A. Leon</u> STATE OF FLORIDA MIAMI-DADE COUNTY Sworn to and subscribed before me this <u>10th</u> day of <u>April</u> , <u>2018</u> by <u>Luis A. Leon</u>	
Signature of Notary Public: <u>Cecilia De Zaragoza</u>		Signature of Notary Public: <u>Mirna Costa</u>	
Print Name: <u>Cecilia De Zaragoza</u>		Print Name: <u>Mirna Costa</u>	
(SEAL) Personally known or Produced Identification		 Notary Public State of Florida Cecilia M De Zaragoza My Commission #G-189108 Expires 02/22/2022	
(SEAL) Personally known or Produced Identification		 Notary Public State of Florida Mirna Costa My Commission #FF-199004 Expires 01/14/2019	

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## Detail by Entity Name

Florida Limited Liability Company  
MIAMI BEACH ASSOCIATES LLC.

### Filing Information

Document Number L15000147135  
FEI/EIN Number 47-5183332  
Date Filed 08/27/2015  
State FL  
Status ACTIVE

### Principal Address

1450 BRICKELL AVENUE  
SUITE 1560  
MIAMI, FL 33131

Changed: 05/05/2016

### Mailing Address

1450 BRICKELL AVENUE  
SUITE 1560  
MIAMI, FL 33131

Changed: 05/05/2016

### Registered Agent Name & Address

CORPORATION COMPANY OF MIAMI  
200 S. BISCAYNE BLVD.  
SUITE 4100 (LAD)  
MIAMI, FL 33131

Name Changed: 05/05/2016

Address Changed: 05/05/2016

### Authorized Person(s) Detail

#### Name & Address

Title MANAGER

KINGSTON, MARCELO  
1450 BRICKELL AVENUE  
SUITE 1560  
MIAMI, FL 33131

**Title MANAGER**

GENTON PEIXOTO, RICARDO  
1450 BRICKELL AVENUE  
SUITE 1560  
MIAMI, FL 33131

**Annual Reports**

<b>Report Year</b>	<b>Filed Date</b>
2017	01/23/2017
2017	11/29/2017
2018	02/28/2018

**Document Images**

<a href="#">02/28/2018 – ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">11/29/2017 -- AMENDED ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">01/23/2017 – ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">05/05/2016 – AMENDED ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/26/2016 – ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">08/27/2015 – Florida Limited Liability</a>	<a href="#">View image in PDF format</a>

Florida Department of State, Division of Corporations